

**Prudential**

The Prudential Insurance Company of America  
 Pruco Life Insurance Company of New Jersey  
 Pruco Life Insurance Company

All are Prudential companies.

<http://lifeinsurance.prudential.com>

## Life Insurance Claim Form

**GETTING STARTED:** If you have any questions about completing this form, please refer to the Instructions that begin on page 6 or contact us at 800-496-1035.

It's Prudential's responsibility to contact all named beneficiaries on the policies provided.

**REMEMBER:** Each beneficiary must complete and submit a separate claim form. Only one death certificate with a raised state seal is needed.

### 1. About You

Provide information about the beneficiary or claimant making the claim. Make sure to verify the Social Security Number (SSN), Tax Identification Number (TIN), or Employer Identification Number (EIN) .

**Chelsea McClain**

Name (First, Middle, Last)

**824 Mullins Ln**

Street Address

**Benton**

City, State, Zip

**KY 42025**

Apt/Suite (optional)

**2702263006**

Home phone

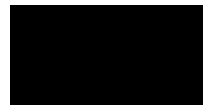
**Wife**

Relationship to deceased

Mobile phone

**02/24/1990**

Date of birth (mm/dd/yyyy)



**6711**

SSN, TIN or EIN

I am the (check one):

☒ Beneficiary - Person named to receive funds from the policy

☐ Power of Attorney for beneficiary (Attach Power of Attorney documentation)

☐ Representative of the insured's estate (Attach a copy of proof of appointment)

☐ Trustee (Attach a copy of the trust agreement) Name of trust

☐ Check if any beneficiaries are considered a "skip person" by the Internal Revenue Code. See instructions for more information.

☐ Legal guardian for the beneficiary (Attach a copy of the court order naming you as guardian)

*If the beneficiary is a minor, provide minor's name and date of birth.*

See page 6 of the Instructions for the information regarding the appropriate TIN or EIN.

First name

MI

Last name

Date of birth (mm/dd/yyyy)

☐ Assignee (Specify amount you are claiming)

☐ Other (Please specify)

**x**